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DEC 06 2004

PATENT  
Attorney Docket No. RIB-005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS: Steitz et al.  
SERIAL NO.: 10/072,634 GROUP NO.: 1631  
FILING DATE: February 8, 2002 EXAMINER: Channing Mahatan  
TITLE: MODULATORS OF RIBOSOMAL FUNCTION AND IDENTIFICATION  
THEREOF

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

COMMENTS ON INTERVIEW SUMMARY

Sir:

This paper is submitted in response to the Interview Summary for the above-identified patent application mailed from the Office on November 15, 2004.

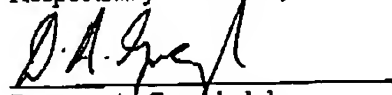
The substance of the October 27, 2004 telephonic interview with the undersigned was included in Applicants' Supplemental Amendment and Response filed with the Office on November 5, 2004, and the Interview Summary issued by the Office on November 15, 2004. Applicants, however, wish to correct the second to last sentence in the Office's Interview Summary. Applicants agreed to amend only claim 40 not "claims 40 and 42" for the reasons of record in Applicants' November 5, 2004 paper. Applicants agreed to cancel claim 42 without prejudice, as noted in Applicants November 5, 2004 paper. Applicants wish to reiterate the contents of the Supplemental Amendment and Response filed November 5, 2004.

The Office is invited to contact the undersigned with any questions about this submission.

Date: December 6, 2004  
Reg. No. 38,678

Tel. No.: (617) 248-7317  
Fax No.: (617) 248-7100

Respectfully submitted,

  
Duncan A. Greenhalgh  
Attorney for the Applicants  
Testa, Hurwitz, & Thibault, LLP  
High Street Tower  
125 High Street  
Boston, Massachusetts 02110

3148939

DEC 06 2004

**TESTA, HURWITZ & THIBEAULT, LLP**

ATTORNEYS AT LAW

HIGH STREET TOWER

125 HIGH STREET

OFFICE (617) 248-7000

BOSTON, MASSACHUSETTS 02110

FAX (617) 248-7100

**TELECOPY COVER SHEET**

*Equipment Operator Contact Number: (617) 248-7011. Please call if you do not receive all the pages.*

Date: December 6, 2004

TO:

Name:

Company: United States Patent and Trademark Office

Address: PTO Fax Center located at Crystal Mall 1

Telephone:

Fax: (703) 872-9306

FROM:

Sender: Duncan A. Greenhalgh

Telephone: (617) 248-7317

Number of Pages *INCLUDING* This Cover Sheet: 9

Ref. No.: U.S. Patent Application Serial No. 10/072,634

Comments:

Attached are documents for submission in U.S. Patent Application Serial No. 10/072,634.

Duncan Greenhalgh

Reg. No. 38,678

This facsimile is subject to attorney-client privilege and contains confidential information intended only for the person(s) named above. If you have received this facsimile in error, please notify us immediately by telephone and destroy the original transmission without making a copy.

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Sent by \_\_\_\_\_ Date Sent \_\_\_\_\_ Time Sent \_\_\_\_\_

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Steitz *et al.*  
SERIAL NO.: 10/072,634 GROUP NO.: 1631  
FILING DATE: February 8, 2002 EXAMINER: Channing S. Mahatan  
TITLE: *Modulators of Ribosomal Function and Identification Thereof*

**CERTIFICATE OF FACSIMILE TRANSMISSION**

I hereby certify that this correspondence, and any document(s) referred to as attached hereto, is/are being transmitted to the United States Patent and Trademark Office, Facsimile No. (703) 872-9306 on this 6<sup>th</sup> day of December, 2004.

  
Karina L. Branzetti

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Attached hereto is/are:

- (1) Transmittal Form (1 pg.);
- (2) Fee Transmittal Form (1 pg.);
- (3) Copy of Fee Transmittal Form (1 pg.);
- (4) Supplemental Information Disclosure Statement (2 pgs.);
- (5) Form PTO-1449 (1 pg.);
- (6) Comments on Interview Summary (1 pg.); and
- (7) Facsimile Cover Sheet (1 pg.)

3149457

# TRANSMITTAL FORM

Application Serial Number	10/072,634
Filing Date	February 8, 2002
First Named Inventor	Steitz
Group Art Unit	1631
Examiner Name	Channing S. Mahatan
Attorney Docket No.	RJB-005
Patent No.	Not applicable
Issue Date	Not applicable

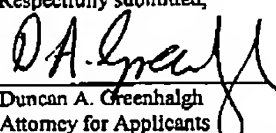
## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> <b>Fcc Transmittal Form</b> <input type="checkbox"/> Check Attached <input checked="" type="checkbox"/> Copy of Fee Transmittal Form	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application <input type="checkbox"/> Formal Drawing(s) <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program <input type="checkbox"/> Amendment After Allowance <input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief (in triplicate) <input type="checkbox"/> Status Inquiry <input type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 <input checked="" type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below) <input checked="" type="checkbox"/> Comments on Interview Summary
<input type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets <u>      </u> ] <input type="checkbox"/> Petition for Extension of Time <input checked="" type="checkbox"/> Supplemental Information Disclosure Statement <input checked="" type="checkbox"/> Form PTO-1449 <input type="checkbox"/> Copies of IDS Citations <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Sequence Listing submission <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above		

## CORRESPONDENCE ADDRESS

Direct all correspondence to: Patent Administrator  
 Testa, Hurwitz & Thibault, LLP  
 High Street Tower  
 125 High Street  
 Boston, MA 02110  
 Tel. No.: (617) 248-7000  
 Fax No.: (617) 248-7100

## SIGNATURE BLOCK

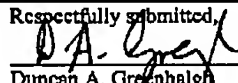
Respectfully submitted,  
  
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 Attorney for Applicants  
 Testa, Hurwitz & Thibault, LLP  
 High Street Tower  
 125 High Street  
 Boston, MA 02110

Date: December 6, 2004  
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 Tel. No.: (617) 248-7317  
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3149431

**FEE TRANSMITTAL  
FY 2005**

Complete if Known	
Application Serial Number	10/072,634
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METHOD OF PAYMENT		FEE CALCULATION (continued)																																																																																							
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Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibault, LLP High Street Tower-125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100		Date: December 6, 2004 Reg. No.: 38,678 Tel. No.: (617) 310-8085 Fax No.: (617) 248-7100  Respectfully submitted,  Duncan A. Greenhalgh Attorney for the Applicants Testa, Hurwitz & Thibault, LLP High Street Tower-125 High Street Boston, MA 02110																																																																																							

3149571

COPY

# FEE TRANSMITTAL FY 2005

Complete if Known

Application Serial Number	10/072,634
Filing Date	February 8, 2002
First Named Inventor	Steitz
Group Art Unit	1631
Examiner Name	Channing S. Mahatan
Attorney Docket No.	RIB-005

## METHOD OF PAYMENT

1. ☐ Payment Enclosed:  
☐ Check ☐ Money Order ☐ Other
2. ☒ The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 20-0531.  
☒ Required Fees (copy of this sheet enclosed).  
☐ Additional fee required under 37 CFR 1.16 and 1.17.  
☐ Overpayment Credit.
3. ☒ Applicant claims small entity status.

## FEE CALCULATION

## 1. FILING FEE

Large Entity Fee (\$)	Fees Description	Fee Paid
790	Utility filing fee	
350	Design filing fee	
160	Provisional filing fee	

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☐ Multiple Dependent Claim(s), if any \$300.00 =  
 \*Based on entry of Preliminary Amendment filed herewith

TOTAL:

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 SUBTOTAL (1) (\$) 0.00

## 2. AMENDMENT CLAIM FEES

Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid
Total	=		x \$ 18.00 =	
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<input type="checkbox"/> First Presentation of Multiple Dep. Claim			+ \$300.00 =	

 TOTAL: (\$)  
 SMALL ENTITY DISCOUNT: (\$)  
 SUBTOTAL (2) (\$0.00)

## FEE CALCULATION (continued)

## 3. ADDITIONAL FEES

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 Other fee (Specify)  
 Other fee (Specify)

SUBTOTAL (3) (\$) 180.00

 SUBTOTAL (1) 0.00  
 SUBTOTAL (2) 0.00  
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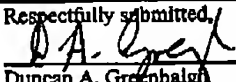
TOTAL (\$) 180.00

## CORRESPONDENCE ADDRESS

Direct all correspondence to:  
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